

DECLARATION of INVENTOR

I, **Gloria Strait**, do declare that I am the inventor of the invention entitled:
Portable Device for Curing Gel Nail Preparations

with accompanying specifications.

That I reside at Wurtsboro, New York; my post office address is:

2650 Route 209, Wurtsboro, New York 12790,

and I am a citizen of the United States.

That I have reviewed and understand the contents of the specifications,
including the claims.

That I believe I am the original and first inventor of the subject matter which
is claimed and for which a patent is sought.

That I am the sole inventor of the subject matter which is claimed and for
which a patent is sought.

That I acknowledge the duty to completely disclose all information which is
material to the examination of the accompanying application pursuant to 37
CFR Section 1.56(a).

That I have been duly warned that willful and false statements and the like are
punishable by fine or imprisonment or both under Section 1001 of Title 18 of

the United States Code, and that any such false statements may jeopardize the validity of the application or any patent issuing thereon.

That all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true.

That I have not filed any foreign application for a patent for the subject matter which is claimed and for which a patent is sought.

That I hereby authorize Sandra M. Kotin, Registration Number 32,577, as my attorney and representative to the Patent and Trademark Office.

That all correspondence should be addressed to:

Sandra M. Kotin
One Fairchild Place - P.O. Box 550
Monticello, New York 12701
Telephone (845) 791-6141

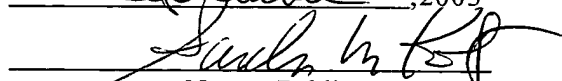
Dated: Monticello, New York

Sept 25, 2003


Gloria Strait

Sworn to before me this 25th day of

September, 2003


Notary Public

SANDRA M. KOTIN
Notary Public, State of New York
Sullivan County Clerk's # 1953
Commission Expires 6/15/07